

HONOLULU ETHICS COMMISSION 925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768 Email: ethics@honolulu.gov Website: http://www.honolulu.gov/ethics/

2020 REGISTRATION

Lobbyist Registration (Type or Print Clearly)

THIS SPACE FOR OFFICE USE ONLY

THICS COMMISSION PERSON

'20 JUN 16 P3:16

PART I LOBBYIST			
NAME (Last) (First) (Middle)			
Shin, Doorae			
LOBBYIST FIRM/EMPLOYER (if applicable) The Surfrider Foundation		TELEPHONE (808) 492-3954	
EMAIL dshin@oahu.surfrider.org			
(City)	(Ctota)		
Honolulu	(State)	(Zip Code) 96828	
PART II.A ORGANIZATION NAME OF ORGANIZATION YOU LOBB	Y FOR (Do not abbreviate)	TELEPHONE	
The Surfrider Foundation (Oahu Chapter)		(808)492-3954	
MAILING ADDRESS (No. and Street or P.O. Box) PO Box 283092		FAX	
		EMAIL dshin@oahu.surfrider.org	
(City) Honolulu	(State) HI	(Zip Code) 96828	
ESTIMATED NUMBER OF MEMBERS (if lobbying on behalf of members)		☐ Not Applicable
	AVE DOLLOV DEGIGIONIS		
METHODS USED BY MEMBERS TO M. Campaign planning aligned with Surfrider mission		☐ Not Applicable	
PART II.B NO LONGER LOB	BYING		
☐ I am no longer authorized to lobby	on behalf of the organization	in Part II.A DATE	

PART III DESCRIPTION	N OF SUBJECTS	ON WHICH	YOU EXPECT TO LOBBY	
☐Business & Economic Development	□Community Ser		□Customer Services	
□Culture & Arts	□Housing		□Public Works, Infrastructure & Sustainability	
□Parks & Recreation	□Public Health, S	afety & Welfare	□Tourism	
□Transportation	□Zoning & Planning		□Specific Legislation: □Additional Sheet(s) Attached Bill No(Year)	
Coastal environ	nmental protect	hon, enjoyn	nert, and access.	
PART IV LOBBYIST CE	ERTIFICATION			
I hereby certify that the foregoing statements are true and correct. LOBBYIST SIGNATURE 6/16/2020 DATE		This By:	Subscribed and swom to before me This day of, By: NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS My commission expires:	
PART V AUTHORIZATI NAME Staley Prom	TIT	LE OF AUTHOR PRESENTED Le	IZING OFFICER OR PERSON gal Associate	
NAME OF ORGANIZATION (if applicable) The Surfrider Foundation			TELEPHONE 949.732.6415	
MAILING ADDRESS (No. and Street or P.O Box) PO Box 73550		FAX	FAX	
		EMA	EMAIL sprom@surfrider.org	
(City) San Clemente	(State) CA (Zip		Code) 92673	
hereby authorize the above game	m		ies on behalf of the undersigned.	
Signature of Authorizing Officer or Person Represented)			(Date)	

Notary pending due COVID-19

Honolulu Ethics Commission

City and County of Honolulu

925 Dillingham Boulevard, Suite 190

Honolulu, Hawaii 96817

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